

EPI Update for Friday, November 14th, 2014
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- Ebola update
- CDC statement on LAIV effectiveness and vaccination of children
- Norovirus shedding after experimental human infection
- Iowa acute disease monthly update
- Meeting announcements and training opportunities

Ebola update

There are no cases of Ebola in Iowa. No persons in Iowa are being tested for Ebola. This week there are eight travelers who are considered to be at "low risk" of Ebola who are under a public health order to self-monitor for symptoms twice daily, and one traveler at "some risk" of Ebola who is under a public health order to stay at home (with non-congregate outdoor activities allowed) and is being monitored twice daily for symptoms. For more information, visit

www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=7B33D2C3-AA8F-46D8-8348-0AA1154CF606.

IDPH Ebola web page can be found at

www.idph.state.ia.us/EHI/Issue.aspx?issue=Ebola%20Outbreak&pg=Ebola%20Outbreak%20Home.

New this week from IDPH

1. Ebola Recommendations for Iowa Businesses
www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=39847BF1-7331-4221-802E-FB1AA7F155E4

New this week from CDC

1. Recommendations for Cleaning Houses in West Africa
www.cdc.gov/vhf/ebola/hcp/cleaning-houses-safely-in-west-africa.html
2. Information on Cleaning and Decontamination
www.cdc.gov/vhf/ebola/prevention/cleaning-and-decontamination.html
3. Video: Respiratory Protection for Ebola
youtu.be/8y19h1hecgy
4. Guidance for Screening and Caring for Pregnant Women with Ebola in U.S. Hospitals
www.cdc.gov/vhf/ebola/hcp/guidance-maternal-health.html
5. More information on Ebola and pet dogs and cats
www.cdc.gov/vhf/ebola/transmission/qas-pets.html
6. Updated Case Counts
www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html
7. Mixing and Using Chlorine Solutions in West African General (Non-ETU) Healthcare Settings

www.cdc.gov/vhf/ebola/hcp/mixing-chlorine-solutions.html

8. Hand Hygiene in West African General (Non-ETU) Healthcare Settings
www.cdc.gov/vhf/ebola/hcp/hand-hygiene.html

CDC statement on LAIV effectiveness and vaccination of children

Two recent studies conducted by the CDC and MedImmune indicate that last year, in the 2013-14 season, the live attenuated influenza vaccine (LAIV, Flumist, MedImmune) showed no measureable effectiveness against the A(H1N1) influenza strain. The reasons behind the lack of effectiveness against H1N1 infections for LAIV during the 2013-14 season are not fully understood. It is possible results may be specific to the H1N1 component of LAIV having a unique hemagglutinin stalk or a susceptibility to thermal degradation. It also is possible, though less likely, there is an unidentified issue with the study methods or analysis plan. The CDC is working with ACIP and other partners to collect more information to better understand these data and to determine what actions might be appropriate.

Children should receive age-appropriate flu vaccine and flu vaccine should not be withheld in an attempt to obtain one formulation over another.

1. Surveillance shows there is substantially more circulation of influenza A (H3N2) and B viruses and very little circulating H1N1 so far;
2. LAIV has been shown to offer good protection against influenza A (H3N2) and influenza B viruses in the past;
3. LAIV may offer better protection than Inactivated Influenza Vaccine (IIV) against antigenically drifted viruses that may circulate this season; and,
4. Vaccine providers have received their vaccine for the 2014-2015 season and have likely administered a good proportion of it; ACIP and CDC have not changed the current influenza vaccination recommendations.

For more information see www.cdc.gov/flu/news/nasal-spray-effectiveness.htm.

Norovirus shedding after experimental human infection

Noroviruses are one of the most common causes of viral gastroenteritis with an estimated 19 to 21 million cases annually in the United States, and is the most common cause of diarrheal outbreaks in Iowa. Typically, people infected with norovirus have symptoms for 24 to 48 hours, but can still shed the virus for at least several days after symptoms resolve.

Baylor University researchers found norovirus in fecal samples for a median of four weeks and for up to eight weeks after illness. This supports epidemiologic investigations of norovirus outbreaks that linked outbreaks to recovered and asymptomatic food handlers.

Noroviruses are usually spread by people failing to wash their hands (after going to the bathroom) and then preparing food for others, or working in food preparation while ill with vomiting and diarrhea. Good hand hygiene is essential! Anyone who is ill with diarrhea, vomiting or fever should not handle food, or work with children, the elderly, or in healthcare.

CDC recommends thoroughly cleaning and disinfecting contaminated surfaces immediately after an episode of illness by using a bleach-based household cleaner. It is important to immediately remove and wash clothing or linens that may be contaminated with vomit or diarrhea (use hot water and soap). For more information about norovirus, visit either www.cdc.gov/norovirus/index.html or www.idph.state.ia.us/idph_universalhelp/main.aspx?system=IdphEpiManual&context=Norovirus_factsheet.

For more information on the Baylor study, visit wwwnc.cdc.gov/eid/article/14/10/08-0117_article.

Iowa acute disease monthly update

The new issue of the Iowa Acute Disease Monthly Update is available by visiting www.idph.state.ia.us/cade/ and scrolling down to 'Reports.' This month's issue can also be accessed directly with the following link www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=8A9B7425-9EC4-4BB6-9F01-697A0943C58D.

Meeting announcements and training opportunities

None

Have a healthy and happy week (and much colder)!

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